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Attached for filing please find:

PTO Fee Transmittal 1.

- 1 pg.

**PTO Form 2038** 2.

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The attached pay the additional fees for the RCE (including extra claims) filed today.

Thank you,

Daniel J. Chaiker, Reg. No. 40,552

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PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE linder the Paperwork Reduction Act of 1995, on persons are required to respond to a collection of info metion unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 09/998,904 FEE TRANSMIT Filing Date 11/30/2001 For FY 2005 First Named Inventor Garner **Examiner Name** Moran, Marjoria A. Applicant claims small entity status. See 37 CFR 1.27 Art Linit 1631 TOTAL AMOUNT OF PAYMENT (\$) 645.00 UTSW:1045 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity Fees Paid (3) Fee (\$) Fee (\$) Application Type Fee (\$) Fee\_(\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 160 150 80 300 150 500 600 Reissue 250 300 200 100 n Provisional n 0 **Small Entity** 2. EXCESS CLAIM FEES Eee\_(\$) Fee Description <u>Fee (\$)</u> 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 360 120 Total Claims Fee Paid (\$) Multiple Dependent Claims Fee (\$) Extra Claims 30 \_ - 20 or HP = \$250,00 Egg\_(\$) Fee Paid (\$) \_10\_\_ 25. HP = highest number of total claims paid for, if greater than 20, 07/2<del>5/2005-MB</del>INAS - 00000045 09998004 Indep. Claims Extra Claims Fee (\$) Fee Paid (5) - 3 or HP = 100 **\$**0 895.00 OP 01 FC:2801 HP = highest number of independent dalms paid for, if greater than 3. 02 FC:2202 250.00 OP **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof, See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fae Paid (3) Total Sheets Fee (\$) - 100 = / 50 = (round up to a whole number) x Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): RCE \$395.00 SUBMITTED BY Registration No. 40,552

This collection of information is required by S7 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Absorbidge, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

(Attorney/Agent)

Telephone 214-886-0001

Date July 22, 2005

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